

U.S NATIONAL STAGE WORKSHEET (DO/EO)

10/527289

U.S. APPL. NO. _____

INTERNATIONAL APPL. _____

EP03/09743

APPLICATION FILED BY: 20 MOS., _____ OR 30 MOS., _____ SCREENED BY _____

PCT International Division

INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE:

- ☒ International application
- ☒ Article 19 amendments
- ☐ Priority Document(s) No. _____
- ☐ Request Form PCT/RO/101
- ☐ PCT/IB/302
- ☐ PCT/IB/304
- ☐ PCT/IB/306
- ☐ PCT/IB/308
- ☐ PCT/IB/331
- ☒ OTHER PCT/IB/ _____
- ☐ PCT/IPEA/409 also 416

- ☒ 409 annexes to IPER
- ☐ PCT/ISA/210 (Search report)
- ☐ Search report References
- ☐ Other Papers filed

WIPO PUBLICATION
PUBLICATION NO. WO 2004/025546
PUBLICATION DATE 25 MAR 04
PUBLICATION LANG., ENGLISH
NOT PUBLISHED
_____ U.S. only _____ Requested

RECEIVED FROM THE APPLICANT: (other than checked above)

- ☒ National application basic fee paid
- ☐ Express Processing Requested
- ☒ Translation of the International Application
- ☐ Used the IB copy of the IA
- ☒ Description
- ☒ Claims 11
- ☒ Drawings 3
- ☐ Foreign Language in drawing
- ☐ Article 19 Amendments
- ☐ Amendment used in application
- ☐ Article 34 Amendment
- ☐ Amendment used in application
- ☐ DNA
- ☐ I194 transaction done

- ☒ Preliminary Amendment(s) filed 09 MAR 05
- ☐ second submission
- ☒ Information Disclosure Statement 09 MAR 05
- ☐ second submission
- ☐ Assignment
- ☐ Forward to Assignment Branch
- ☐ Substitute Specification
- ☐ Small Entity Statement
- ☐ type _____
- ☒ Oath/Declaration (date submitted _____)
- ☐ Not executed
- ☒ Executed
- ☐ Power of Attorney
- ☐ Change of Address

35 USC Receipt of Request (PTO - 1399 Transmittal Letter) 09 MAR 05

Date Acceptable oath/declaration received _____

102(e) Date _____

Date complete 35 USC 371 requirements met _____

DATE NOTICE COMPLETED

DO/EO 903 Notice of Acceptance 7/27/05

DO/EO 905 Notice of Missing Requirements

DO/EO 917 Notice of A defective oath or declaration

DO/EO 916 Notice of defective response

DO/EO 913 Notice of defective translation

DO/EO 909 Notification of Abandonment

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

10/527289

1 Date of Request: _____		2 Serial/Patent # _____																																																																																		
3 Please refund the following fee(s): <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:10%;"></td><td style="width:40%;">Filing</td><td style="width:10%;">4 PAPER NUMBER</td><td style="width:10%;">5 DATE FILED</td><td style="width:10%;">6 AMOUNT</td></tr> <tr><td></td><td>Amendment</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Extension of Time</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Notice of Appeal/Appeal</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Petition</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Issue</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Cert of Correction/Terminal Disc.</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Maintenance</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Assignment</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Other</td><td></td><td></td><td>\$</td></tr> </table>		Filing	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT		Amendment			\$		Extension of Time			\$		Notice of Appeal/Appeal			\$		Petition			\$		Issue			\$		Cert of Correction/Terminal Disc.			\$		Maintenance			\$		Assignment			\$		Other			\$	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="height: 40px;"></td> <td colspan="2">7 TOTAL AMOUNT OF REFUND</td> <td>\$</td> </tr> <tr> <td colspan="6">8 TO BE REFUNDED BY:</td> </tr> <tr> <td colspan="2"></td> <td colspan="4">Treasury Check</td> </tr> <tr> <td colspan="2"></td> <td colspan="4">Credit Deposit A/C #:</td> </tr> <tr> <td colspan="2"></td> <td colspan="4"> <div style="border: 1px solid black; display: inline-block; padding: 2px;"> 9 </div> </td> </tr> </table>							7 TOTAL AMOUNT OF REFUND		\$	8 TO BE REFUNDED BY:								Treasury Check						Credit Deposit A/C #:						<div style="border: 1px solid black; display: inline-block; padding: 2px;"> 9 </div>			
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11 REFUND REQUESTED BY: <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>		<div style="border: 1px solid black; padding: 5px;"> TYPED/PRINTED NAME: _____ SIGNATURE: _____ OFFICE: _____ <div style="border-top: 1px solid black; height: 20px; margin-top: 5px;"></div> </div>																																																																																		
		<div style="border: 1px solid black; padding: 5px;"> TITLE: _____ <small>Repln. Ref: 07/29/2005 PKIDWELL 0013263600</small> <small>DAB:500220 Name/Number:10527289</small> <small>FCPHONE: \$500.00 CR</small> </div>																																																																																		
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**

Correspondence Address

Customer Number

20792

Change Reason

Directly Supplied

Name *

MYERS BIGEL SIBLEY & SAJOVEC

Street *

PO BOX 37428

City *

RALEIGH

State/Province

NC

Postal

27627

Country *

US

Save

Refresh

Clear

Other Contact Information:

Phone No. / Ext.

Fax No.

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Last Modification

SINTHAVONG

05/09/2005

pkidwell

07/29/2005